

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress, Inc.

Full Name (Last, First, Middle Initial)

**A. DRUMGOOLE, CHRIS, , ,**

Mailing Address 9571 SW 124 TERRACE

City  
MIAMIState  
FLZip Code  
33176Purpose of Disbursement  
REFUND OF CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	8

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB20A.I25586

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DUBOSE, VIVIAN, N., ,**

Mailing Address PO BOX 18651

City  
ATLANTAState  
GAZip Code  
31126Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	8

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : SB20A.I25512

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DUHAMEL, WILLIAM, , ,**

Mailing Address 3881 CLAY ST

City  
SAN FRANCISCOState  
CAZip Code  
94118Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	8

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB20A.I25476

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4500.00

**TOTAL** This Period (last page this line number only).....▶